PTO/SB/21 (09-04)

Date | March 17, 2005

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 09/111,123 TRANSMITTAL Filing Date 07/06/1998 **FORM** First Named Inventor Zaghouani, H. Art Unit 1644 **Examiner Name** Szperka, M. (to be used for all correspondence after initial filing) Attorney Docket Number

Tota	al Number of	Pages in This Submission	10		ALLIA.143	ICP2		
ENCLOSURES (Check all that apply)								
√		smittal Form		Drawing(s) Licensing-related Papers			After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences	
			Applic pursua	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks Applicant is resubmitting response after receivir pursuant to 37 CFR1.121 which was dated 2/4/extension of time.			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
Firm Name Alliance Pharmaceutical Corp./Astral, Inc.								
Signature O1 (0)								
Printed name John E. Wurst								
Date March 17, 2005				Reg. No.	40,283	40,283		
CERTIFICATE OF TRANSMISSION/MAILING								
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:								
Signature O. A. I. O. I. O. A. I. O. A. I. O.								

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John E. Wurst

Typed or printed name

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				Examiner Nam		perka, M.	
✓ Applicant claims sma	l entity statu	s. See 37 CFR 1.	.27	Art Unit	· 02	1644	
TOTAL AMOUNT OF PAY	MENT (\$) 60	-	Attorney Dock		LIA.143CP2	
METHOD OF PAYMEN	T (check al	that apply)			7.12	201.110012	
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 01-1008 Deposit Account Name: Alliance Pharmaceutical C							
For the above-ident	ified deposit	account, the Direct	ctor is hereb	y authorized to	o: (check all	that apply)	
✓ Charge fee(s) indicated b	elow		Char	ge fee(s) ind	cated below, ex	cept for the filing fee
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card							
Information and authorization on PTO-2038. FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
i. Basic Filing, Seai	FILING		SEARC	H FEES	FXAMIN	ATION FEES	
Application Type	Fee (\$)	Small Entity		Small Entity		Small Entity	Food Dold (A)
Utility	300	<u>Fee (\$)</u> 150	<u>Fee (\$)</u> 500	<u>Fee (\$)</u> 250	<u>Fee (\$)</u> 200	Fee (\$)	Fees Paid (\$)
Design	200	100	100			100	
Plant	200	100	300	50	130	65	
Reissue	300	150		150	160	80	
Provisional			500	250	600	300	
2. EXCESS CLAIM FEES Small Entity							
Fee Description Each claim over 20 (including R	aiccuac)				<u>Fee (\$)</u> 50	<u>Fee (\$)</u> 25
Each independent cla			200	100			
Multiple dependent c		8				360	180
Total Claims	Extra Clair	ns <u>Fee (\$)</u>	Fee P	<u>aid (\$)</u>		Multiple De	pendent Claims
- 20 or HP =	oloimo - sid f	X	_=			Fee (\$)	Fee Paid (\$)
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HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE							

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee Paid (\$) (round up to a whole number) x

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): one month extension of time

\$60

Fees Paid (\$)

SUBMITTED BY	<u> </u>	<u> </u>			
Signature	\setminus	X	al	Registration No. (Attorney/Agent) 40,283	Telephone 858-410-5174
Name (Print/Type)	John E. Wurs	?			Date March 17, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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